ISSUE SLIP STAPLE AREA (for additional cross references)

. POSITION	INITIALS	ID NO.	DATE	
FEE DETERMINATION		-	<u> </u>	
O.I.P.E. CLASSIFIER		49	10/25/00	
FORMALITY REVIEW		105655	12/5	
RESPONSE FORMALITY REVIEW		7.60.30	10763	

INDEX OF CLAIMS

•	Rejected	Ν	Non-elected
	Allowed	1	Interference
_	(Through numeral) Canceled	Α	Appeal
÷	Restricted	_	Objected

÷	Restricted	0	Objected	
Claim Date	Claim D	ate	Claim	Date
Final Programme of the Control of th	Final Original		Final	
2 1 1 1 1 1	52	++++	101-	
3 / / / /	53		103	
4 / / / / /	54	++++	104	
	. 56	 	106	┝╫┼┼┼┼┼
2 7 V V V V	57		107	
8 1 1 1	58		108	+
	60	 	110	+++++
- 12 / 12 / 12	61		111 .	
12 (7) 1 (7) 7	62 63		112	+
14 D 20 0	64		114	
15 / / / /	65		115	
16 / / /	66		116	
18/11/01	68		118	
19 0 0 0 0	69		119	- - - -
20 = - = = = = = = = = = = = = = = = = =	70		120	
22 / 1 / / /	71 72		121	
23 / 1 / /	73		123	
24 0 0 V V	74		124	
25 V V V V	75		125	
	77		126	
38 V V V	78		128	
	79		129	
	80	++++	130	
	82	 	132	
33 34 34	83		133	
35	84 85		134	+
36	86	- - - - 	136	++++
37 38	87		137	
39	88	- 	138	
40	90	- 	139	╌┼┼┼┼┼┼
41	91		141	
42 43	92		142	
44	93 94	 	143	
45	95	- 	144	
46	96		146	
47 48	97 98		147	
49	99	╶╏╸╏╸╏╸ ┪╸┃	148	
50	100		150	

If more than 150 claims or 10 actions staple additional sheet here